COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHNL031252 US

s a below named inventor, I hereby declare that:					
My residence, post office address and citizenship are as stated next to my name.					
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
the specification of which (chec	k only one item below):				
is attached hereto.					
☐ was filed as United States a	pplication				
Serial No					
on					
and was amended					
on					
☑ was filed as PCT internation	al application				
Number PCT/IB2004/051987					
on 06 October 2004					
and was amended under PCT	Δrticle 19				
	Attole 15		(if applicable).		
on			(п аррпсаые).		
I hereby state that I have review claims, as amended by any am		nts of the above-identified specification	on, including the		
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).					
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:					
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:					
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119		
Europe	03103745.0	9 October 2003	YES		
	*				
		DEDARTMENT OF COMMERCE Patron	Trademaka Office		

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(includ	les Reference to PC	n For Patent Application and I			Attorneys Docket Number PHNL031252 US
POW all bus	ER OF ATTORNE iness in the Patent a	Y: As a named inventor, I hereby apparent Trademark Office connected there	point the following attorney(s) and/eewith. (List name and registration r	or agent(s) to pros number)	secute this application and transact
Micha	E. Haken, Reg. ael E. Marion, R ard M. Blocker, F	eg. No. 32,266		Direct Telephor (name and tele (914)332-02	phone number)
	FULL NAME OF INVENTOR	FAMILY NAME MARTENS	FIRST GIVEN NAME Hubert	-	SECOND GIVEN NAME Cécile François
201	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COU The Netherlands	NTRY	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhov	en	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME SPRUIJT	FIRST GIVEN NAME Aloysius		SECOND GIVEN NAME Michael Josephus Maria
202	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COU The Netherlands	NTRY	The Netherlands STATE & ZIP CODE/COUNTRY
POST OFFICE ADDRESS		POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhov	5656 AA Eindhoven	
	FULL NAME OF INVENTOR	FAMILY NAME CONSEMULDER	FIRST GIVEN NAME Marc		SECOND GIVEN NAME
203	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COU The Netherlands	NTRY	The Netherlands
	POST OFFICE POST OFFICE ADDRESS CITY ADDRESS Prof. Holstlaan 6 5656 AA Eindhoven		en	STATE & ZIP CODE/COUNTRY The Netherlands	
	FULL NAME OF INVENTOR	FAMILY NAME WOERLEE	FIRST GIVEN NAME Pierre		SECOND GIVEN NAME Hermanus
204	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COU The Netherlands	INTRY	The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhov	en	STATE & ZIP CODE/COUNTRY The Netherlands
4.4	FULL NAME OF INVENTOR				SECOND GIVEN NAME Robert

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

CITY

RESIDENCE &

CITIZENSHIP

POST OFFICE ADDRESS

205

CITY

Eindhoven
POST OFFICE ADDRESS

Prof. Holstlaan 6

STATE OR FOREIGN COUNTRY

5656 AA Eindhoven

The Netherlands

\ '		
SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE
10 May 2005	10 May 2005	
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	
DATE	DATE	

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

COUNTRY OF CITIZENSHIP

STATE & ZIP CODE/COUNTRY

The Netherlands

The Netherlands

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

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s a below named inventor, I here	eby declare that:				
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I believe I am the original, first a plural names are listed below) or entitled:	nd sole inventor (if only one na f the subject matter which is c	ame is listed below) or an original, fi laimed and for which a patent is sou	irst and joint inventor (if ught on the invention		
the specification of which (check	only one item below):				
is attached hereto.					
☐ was filed as United States ap	pplication				
Serial No					
on					
and was amended					
on .a.:					
x was filed as PCT internation	al application				
Number PCT/TB2004/051987	7				
on 06 October 2004					
and was amended under PCT A	Article 19				
	article 10		(if applicable).		
on			(" 355		
I hereby state that I have review claims, as amended by any ame		nts of the above-identified specificat	tion, including the		
I acknowledge the duty to disclo Title 37, Code of Federal Regul		rial to the examination of this applica	ation in accordance with		
or inventor's certificate or of an States of America listed below any PCT international application	y PCT international application and have identified below any on(s) designating at least one	States Code, § 119 of any foreign and (s) designating at least one country foreign application(s) for patent or incountry other than the United States the application(s) of which priority is	other than the United nventor's certificate or s of America filed by me		
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:					
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119		
Europe	03103745.0	9 October 2003	YES		
		DEBARTMENT OF COMMERCE .	1 2 1 25		

Combined Declaration For Patent Application and Power of Attorney (Continued) includes Reference to PCT International Applications)					Attorneys Docket Number PHNL031252 US
OWER OF ATTOR business in the Pat	NEY: As a named inventor ent and Trademark Office of	or, I hereby appo onnected therev	oint the following attorney(s) and with. (List name and registration	l/or agent(s number)	s) to prosecute this application and transact
ack E. Haken, R lichael E. Marior dward M. Block	eg. No. 26,902 , Reg. No. 32,266 er, Reg. No. 30,245			(name	Felephone Calls to: and telephone number) 332-0222
FULL NAME	FAMILY NAME MARTENS		FIRST GIVEN NAME Hubert		SECOND GIVEN NAME Cécile François
RESIDENCE CITIZENSHIP	Eindhoven		STATE OR FOREIGN CO The Netherlands		COUNTRY OF CITIZENSHIP The Netherlands
POST OFFIC ADDRESS	POST OFFICE ADDI		5656 AA Eindho	ven	STATE & ZIP CODE/COUNTRY The Netherlands
FULL NAME INVENTOR	SPRUIJT		FIRST GIVEN NAME Aloysius		SECOND GIVEN NAME Michael Josephus Maria
02 RESIDENCE CITIZENSHIP	Eindhoven		STATE OR FOREIGN CO The Netherlands		COUNTRY OF CITIZENSHIP The Netherlands
POST OFFIC ADDRESS	POST OFFICE ADD Prof. Holstla		5656 AA Eindho	ven	STATE & ZIP CODE/COUNTRY The Netherlands
FULL NAME INVENTOR		FAMILY NAME CONSEMULDER			SECOND GIVEN NAME
			STATE OR FOREIGN CO		COUNTRY OF CITIZENSHIP The Netherlands
POST OFFIC ADDRESS	POST OFFICE ADD Prof. Holstia		5656 AA Eindho	ven	STATE & ZIP CODE/COUNTRY The Netherlands
FULL NAME INVENTOR	OF FAMILY NAME WOERLEE		FIRST GIVEN NAME Pierre		SECOND GIVEN NAME Hermanus
)4 RESIDENCE CITIZENSHII	Eindhoven		STATE OR FOREIGN CO		COUNTRY OF CITIZENSHIP The Netherlands
POST OFFIC ADDRESS	POST OFFICE ADD Prof. Holstla		5656 AA Eindho	ven	STATE & ZIP CODE/COUNTRY The Netherlands
FULL NAME INVENTOR	FAMILY NAME KOPPERS		FIRST GIVEN NAME Wilhelmus		SECOND GIVEN NAME Robert
05 RESIDENCE CITIZENSHI	Eindhoven			OUNTRY S	COUNTRY OF CITIZENSHIP The Netherlands
POST OFFICE POST OFFICE ADDRESS ADDRESS Prof. Holstlaan 6		5656 AA Eindho	ven	STATE & ZIP CODE/COUNTRY The Netherlands	
ue: and further that prisonment, or bot	these statements were made	te with the knov	vledge that willful false statemer	nts and the	ide on information and belief are believed to be like so made are punishable by fine or statements may jeopardize the validity of the
SIGNATURE OF INVENTOR 201 SIGNATUR		SIGNATUR	E OF INVENTOR 202	OF INVENTOR 202 SIGNATURE C	
DATE		DATE			DATE 09 May 2005

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

SIGNATURE OF INVENTOR 205

DATE

SIGNATURE OF INVENTOR 204

DATE

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

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ATTORNEY'S DOCKET NUMBER PHNL031252 US

s a below named inventor, I he	reby declare that:		
My residence, post office addre	ess and citizenship are as stat	ed next to my name.	
I believe I am the original, first plural names are listed below) entitled:	and sole inventor (if only one i of the subject matter which is	name is listed below) or an original, to claimed and for which a patent is so	first and joint inventor (if ught on the invention
the specification of which (chec	ck only one item below):		
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Serial No			
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I hereby state that I have review claims, as amended by any am		ents of the above-identified specificat	tion, including the
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or inventor's certificate or of an States of America listed below any PCT international applicati	y PCT international application and have identified below any on(s) designating at least one	States Code, § 119 of any foreign ap n(s) designating at least one country foreign application(s) for patent or in country other than the United States the application(s) of which priority is	other than the United nventor's certificate or s of America filed by me
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIOR	ITY CLAIMS UNDER 35 U.S.C. 119	•
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	03103745.0	9 October 2003	YES
	110	DEDARTMENT OF COMMEDCE S.	1 - 1 T - 1 - 0 - 0 - 0

Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245					(name and tele	Direct Telephone Calls to: name and telephone number) (914)332-0222		
Luwa	id W. Blocker, i	teg. 110. 00,2 10						
	FULL NAME OF	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME		
	INVENTOR MARTENS			Hubert		Cécile François		
201	RESIDENCE & CITY CITIZENSHIP Eindhoven			STATE OR FOREIGN COUN	NTRY	COUNTRY OF CITIZENSHIP The Netherlands		
				The Netherlands		STATE & ZIP CODE/COUNTRY		
	POST OFFICE ADDRESS	POST OFFICE ADDRE		CITY 5656 AA Eindhove	\n	The Netherlands		
		Prof. Holstlaar	10	FIRST GIVEN NAME	# T	SECOND GIVEN NAME		
	FULL NAME OF SPRUIJT		Aloysius			Michael Josephus		
						Maria		
		OUTV	STATE OR FOREIGN COUNTRY		ITDV	COUNTRY OF CITIZENSHIP		
202	RESIDENCE & CITIZENSHIP	CITY Eindhoven		The Netherlands	41IXI	The Netherlands		
		POST OFFICE ADDRE		CITY	 .	STATE & ZIP CODE/COUNTRY		
	POST OFFICE ADDRESS			5656 AA Eindhoven		The Netherlands		
		Prof. Holstlaan 6		FIRST GIVEN NAME	7 F U	SECOND GIVEN NAME		
	FULL NAME OF INVENTOR	FAMILY NAME CONSEMULDI	= R	Marc		OLOGINE GIVEN IS INIE		
202	RESIDENCE &	CITY		STATE OR FOREIGN COUN	NTRY	COUNTRY OF CITIZENSHIP		
203	CITIZENSHIP Eindhoven			The Netherlands		The Netherlands		
	POST OFFICE	POST OFFICE ADDRI	SS	CITY		STATE & ZIP CODE/COUNTRY		
	ADDRESS Prof. Hoistlaan		i	5656 AA Eindhoven		The Netherlands		
.,	FULL NAME OF INVENTOR WOERLEE			FIRST GIVEN NAME		SECOND GIVEN NAME		
				Pierre		Hermanus		
204	RESIDENCE & CITY CITIZENSHIP Eindhoven			STATE OR FOREIGN COUN	NTRY	COUNTRY OF CITIZENSHIP		
				The Netherlands		The Netherlands		
	POST OFFICE POST OFFICE ADDR		ESS	CITY		STATE & ZIP CODE/COUNTRY		
	ADDRESS	Prof. Holstlaai	า 6	5656 AA Eindhoven		The Netherlands		
	FULL NAME OF FAMILY NAME KOPPERS			FIRST GIVEN NAME		SECOND GIVEN NAME		
				Wilhelmus		Robert		
205	RESIDENCE & CITY			STATE OR FOREIGN COU	NTRY	COUNTRY OF CITIZENSHIP		
	CITIZENSHIP	Eindhoven		The Netherlands		The Netherlands		
	POST OFFICE ADDRESS	POST OFFICE ADDR		CITY		STATE & ZIP CODE/COUNTRY The Netherlands		
	ADDRESS	Prof. Holstlaa	า ๒	5656 AA Eindhoven		The Netherlands		
true: a	nd further that these	e statements were made der section 1001 if Title 1	with the knowledg	e that willful false statements :	and the like so n	formation and belief are believed to be nade are punishable by fine or ts may jeopardize the validity of the		
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202 SIGN		SIGNAT	URE OF INVENTOR 203			
DATE		DATE		DATE				
SIGNATURE OF INVENTOR 204		SIGNATURE OF INVENTOR 205						
Fledal		N. W	W. N. Kopper.					
DATE 11 May 2005		DATE 11	May 2005					
				U.S. DEPART	MENT OF CO	MMERCE- Patent and Trademarks Office		

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)

Attorneys Docket Number PHNL031252 US